

IV. EMPLOYMENT

List your employment activities, beginning with the present (#1) and working back to age 16. You should list all full-time work, part-time work, military service, temporary military duty locations over 90 days, self-employment, other paid work, and all periods of unemployment. The entire period must be accounted for without breaks, but you need not list employments before your 16th birthday. If you need additional space, attach FD-140a (Continuation Sheet to FD-140).

• **Code.** Use one of the codes listed below to identify the type of employment:

- |  |  |   |
|--|--|---|
| <b>1</b> - Active military duty stations | <b>4</b> - Other Federal employment  | <b>7</b> - Unemployment (Include name of person who can verify)     |
| <b>2</b> - National Guard/Reserve        | <b>5</b> - State Government (Non-Federal employment)                                     | <b>8</b> - Federal Contractor (List contractor, not Federal agency) |
| <b>3</b> - U.S.P.H.S. Commissioned Corps | <b>6</b> - Self-employment (Include business name and /or name of person who can verify) | <b>9</b> - Other  |

1. Month/Year-Month/Year to Present	Code	Employer/Name/Military Duty Location	Your Position Title/Military Rank		
Address of Employment		City (County)	State	Zip Code	Telephone Number ( )
Immediate Supervisor		Telephone Number of Supervisor ( )	Reason for Leaving		
Salary/Earnings ..... per ..... Ending \$ ..... per .....			Average No. of Hrs. per week .....	Level of Security Clearance (if applicable)	
			<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	
Work Description (Describe your specific duties and, if applicable, include all supervisory, managerial, scientific, and professional experience.)					

2. Month/Year-Month/Year	Code	Employer/Name/Military Duty Location	Your Position Title/Military Rank		
Address of Employment		City (County)	State	Zip Code	Telephone Number ( )
Immediate Supervisor		Telephone Number of Supervisor	Reason of Leaving		
Salary/Earnings Starting \$ ..... per ..... Ending \$ ..... per .....			Average No. of Hrs. per week .....	Level of Security Clearance	
			<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	
Work Description (Describe your specific duties and, if applicable, include all supervisory, managerial, scientific, and professional experience.)					

3. Has any of the following happened to you? If Yes, begin with the most recent occurrence and go backward, providing date fired, quit, or left, and other information requested.  Yes  No Attach additional sheets as necessary.

• **Code.** Use the following codes and explain the reason your employment ended:

- |   |   |
|---|---|
| <b>1</b> - Fired from a job   | <b>4</b> - Left a job by mutual agreement following allegations of unsatisfactory |
| <b>2</b> - Quit a job after being told you'd be fired                         |   |
| <b>3</b> - Left a job by mutual agreement following allegations of misconduct | <b>5</b> - Left a job for other reasons under unfavorable circumstances           |

Month/Year	Code	Specify Reason	Employer's Name and Address (Include City/Country if outside U.S.)	State	Zip Code

4. To your knowledge, have you ever had a clearance or access authorization denied, suspended, or revoked, or have you ever been debarred from government employment?  Yes  No If Yes, give date of action and agency. **Note:** An administrative downgrade or termination of a security clearance is not a revocation.

Month/Year	Department or Agency Taking Action	Month/Year	Department or Agency Taking Action